POSITION	ID NO.	DATE
CLASSIFIER		
EXAMINER	①	①	5-?-①
TYPIST		432	5-19-93
VERIFIER		322	5-20-93
CORPS CORR.			
SPEC. HAND			
FILE MAINT.			
DRAFTING			

INDEX OF CLAIMS

Claim		Date							
Final	Original	1/93							
1	1								
2	2								
	3								
	4								
	5								
	6								
	7								
	8								
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32	32	✓							
38	33	✓							
34	34	✓							
35	35	✓							
36	36	✓							
37	37	O							
38	38	O							
39	39	✓							
40	40	✓							
41	41	✓							
42	42	✓							
43	43	✓							
44	44	✓							
45	45	✓							
46	46	✓							
47	47	O							
48	48	✓							
49	49	✓							
50	50	✓							

SYMBOLS

✓	Rejected
=	Allowed
– (Through numeral)	Canceled
+	Restricted
N	Non-elected
I	Interference
A	Appeal
O	Objected

Claim		Date						
Final	Original	1/93	2/94					
	51	O						
	52	✓						
1	53	=						
2	54							
3	55							
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